	PAICINI		10722664									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER TH				
TOTAL CLAIMS			Fo				].	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	<del></del>		BASIC FEE	
TOTAL CHARGEABLE CLAIMS			<b>থ</b> ⊘ minus 20=		• (0			X\$ 9=	1	OR	X\$18=	(80
INDEPENDENT CLAIMS					* 16			X43=	1	OR	X86=	160
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT		$\overline{/}$			+145=		OR	+290=	
• If	the difference	in column 1 is	less than zero, enter "0"			column 2		TOTAL	+	OR	TOTAL	950
CLAIMS AS AMENDED - PART II									<u> </u>	1	OTHER	
		(Column 1)	(Colum	olumn 2) (Column 3)			SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 36	Minus	** 3	30	= (P		X\$ 9=		OR	X\$18=	3800
AME	Independent	• U	Minus		<u> </u>	=		X43=		OR	X86=	2000
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OŘ	+290=	
								TOTAL	-	OR	TOTAL ADDIT, FEE	500.0
		(Column 1)		(Colum	າກ 2)	(Column 3)	_	OUII. FEE		•	ADDIT. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	<u>.</u>	-		X43=		OR	X86=	
	FIRST PRESE	INTATION OF MIC	LIPLE DEF	ENDENT	·		'	+145=		OR	+290=	
								TOTAL		OR ,	TOTAL	
		(Column 1)		(Colum	n 21	(Column 3)	A	DDIT. FEE		J	ADDIT. FEE <b>L</b>	
U	`	CLAIMS REMAINING		HIGHE	ST .		lr		ADDI-	•		ADDI-
AMENDMENT (		AFTER AMENDMENT		PREVIO	USLY	PRESENT, EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	•	Minus	**		<b>=</b> .		X\$ 9=		OR	X\$18=	
Z E	Independent	•	Minus	###		8		X43=			X86=	
1	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT	CLAIM				<b></b>	OR	7002	
• H	f the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
!	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest or properties the appropriate here in column 1.											
•	ne 'Honesi Num	Der PTEMBUSIV Paid	FOR Clinical or	Independen	nt ic the	highest ourmbou	r four	d in the an	nmorista bov	in each	man 1	

Application or Docket Number